

Robin with HealthPartners EZ Plan Guide

Effective Jan. 1, 2019

Members can live healthier lives with a new, integrated health care option. Robin with HealthPartners represents a new way of thinking about health and gives members access to high-quality, affordable care.

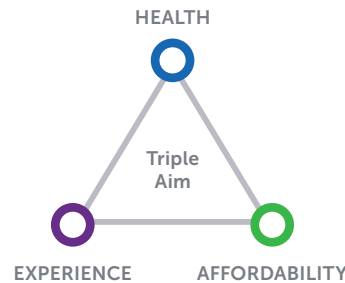
Meet Robin, the sign of a healthy Wisconsin

Robin represents the coming of spring. Rebirth. And the start of something new. A new way of thinking. A change in how you think about health.

HealthPartners has teamed up with Bellin Health and ThedaCare to offer a local health plan option with national reach. This relationship leverages the best of all companies: Bellin Health and ThedaCare's network of providers and HealthPartners health plan expertise. By joining together, we will maximize our collective innovations in health care to improve the health and well-being of individuals, businesses and the communities we serve.

Transforming health care

We are dedicated to building and nurturing relationships, and connecting with you on a personal level to provide personalized support. Because we bring care and coverage together. Through collaboration, our solutions are rooted in the Triple Aim.



HEALTH

Supporting success by delivering comprehensive experiences that enable productivity and wellness.

AFFORDABILITY

Using data-driven insights to identify opportunities and intentionally build solutions that drive innovation and measurable change.

EXPERIENCE

Providing personalized support that engages and activates healthy lifestyles, and meets individual needs.

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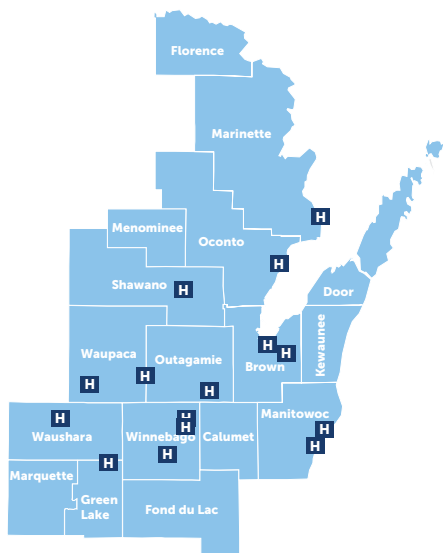
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Working together to deliver results

Bellin Health, ThedaCare and HealthPartners are centered on a common passion to improve the health and well-being of individuals, businesses and the communities we serve. We're committed to providing access to higher quality care at a lower cost.

- **Access to the best care possible.** Members can choose among high-quality, low-cost providers across northeast Wisconsin – no referral needed.
- **National coverage.** Travelers and dependents can get the care they need from a national network of more than 1 million providers and 6,000 hospitals – no referral required.
- **Fast and easy online care.** Members get unlimited visits with no cost sharing for use of virtuwell® – a 24/7 online clinic.* Plus, in-network coverage for Doctor On Demand.



Network options

Robin focused network

Providers in the Robin focused network were selected because they give high-quality, cost-effective care. The network is designed to reach Triple Aim results for the northeast Wisconsin community.

The Robin focused network includes:

- Aurora Health Care hospitals and clinics
- Bay Area Medical Center
- BayCare Clinic
- Bellin Health hospitals and clinics
- Holy Family Memorial hospital and clinics
- ThedaCare hospitals and clinics
- And more!

Search the focused network at healthpartners.com/robin/focused.

Robin broad access network

The Robin broad access network in northeast Wisconsin includes 98 percent of hospitals and more than 90 percent of providers.

Search the broad access network at healthpartners.com/robin/broad.

Guiding members through the complexities of health care

Robin plans give your employees unparalleled support to improve their health.

| EVERYDAY SUPPORT | |
|---|---|
| Member Services | Answers questions about health and dental plan coverage or claims, finding a doctor, and more |
| myHealthPartners online and myHP mobile app | Check claims and balances, search for doctors, view ID card and more |

| DECISION SUPPORT | |
|--------------------------------|---|
| CareLine SM service | 24/7/365 nurse help for symptom support and advice on treatment |
| Nurse Navigators | Help with health care needs, benefits, choosing a treatment option and more |
| Behavioral Health Navigators | Support for mental or chemical health needs, benefits, choosing a treatment option and more |
| Pharmacy Navigators | Pharmacy benefit help, including cost savings and prior authorization |
| BabyLine Phone Service | Nurse support to pregnant mothers and new parents 24/7/365 |
| Online Decision Points | Resources that consider your personal values to help make medical decisions |
| Plan for Me SM | Tool to compare plan options and potential costs |
| Prescription shopping tool | Find the lowest cost of medicine, transfer pharmacies and learn ways to save |

| RESILIENCE AND WELL-BEING | |
|---------------------------|--|
| Beating the Blues | Teaches skills to decrease stress, depression and anxiety |
| Health assessment | Online questionnaire to learn about your current health, set goals and get recommendations on how to improve |
| Well-being activity | Complete an activity or work with a health coach on topics that interest you |

| HEALTH ADVOCACY SUPPORT | |
|-----------------------------------|--|
| Case Management Nurse support* | Ensures the right care and support for any condition |
| Disease Management Nurse support* | Ensures the right care and support for chronic conditions like asthma, cancer, COPD, diabetes, low back pain and pregnancy |
| Medication Therapy Management | Ensures drug safety and effectiveness for members taking multiple medicines |
| Assist America | Emergency assistance when away from home, available 24/7/365 |

| PERSONAL HEALTH | |
|---|---|
| Frequent Fitness* | Work out 12 times a month at select fitness centers and receive up to \$40 off your fitness club membership dues for two adults (\$20 per person) |
| Healthy Discounts SM program | Discounts just for being a HealthPartners member |
| Preventive care guidelines | Outlines recommendations from the experts |
| Interactive health tools and trackers | General health tools and symptom checker |
| Online care | Fast and convenient treatment for a variety of conditions |

*These programs are included at no extra cost for self-insured EZ plans. That makes EZ plans an even better value compared to custom plans!

Simple solutions with an exceptional experience

- **Self-insured savings.** Employers typically save on their medical plan costs when self-insured. Plus, the exclusion of self-insured plans from state and federal taxes related to health care reform could increase that savings. Many self-insured plans are exempt from taxes and assessments, a typical savings of 4 to 6 percent, as well as some state-mandated benefits.
- **Plan flexibility.** Employees can choose what works best for their lifestyle and budget when you mix and match among the variety of plans and networks. See *Administration* rules on page 8.
- **Plan comparison and enrollment.** Help your employees choose the right plan for them with the Plan for MeSM online tool.*
- **Communications support.** Open enrollment materials for employees, specific to your plan(s). As well as communication toolkits to engage employees in living their best life.
- **Easy implementation.** Hassle-free administration and excellent service for employers. Plus plan information at your fingertips when and where you need it through E-tools.
- **Claims fiduciary services.** We coordinate all levels of appeals including the external review option.

Additional products and pricing

- Health Reimbursement Account (HRA) cost is \$5.75 PPPM (per participant per month), or \$4.75 PPPM if the group is enrolled in electronic communication and requires direct deposit for all

participants. Groups with less than 20 participants will also have a \$250 implementation fee.

- Flexible Spending Account (FSA) cost varies by group size.
- Employee Assistance Program (EAP) fees are separate and vary by programs and features.

An alternative for groups with 20-50 enrolled employees:

Level funded – Pay a known monthly cost. If a group's claims fall under the estimated amount, the surplus is returned to the group. Aggregate stop-loss covers claims in excess of the estimated amount.

Stop-loss options for groups with 51+ enrolled employees (pick one):

Traditional – 12-month stop-loss policy with specific and aggregate stop-loss.

Assure – 24-month stop-loss policy with aggregate stop-loss only, packaged with cumulative monthly maximum protection providing a ceiling on the total amount of claim liability you're required to fund on a monthly basis. Assure also puts a ceiling on the total amount of claim liability during your two-year contract period, so your liability is capped.

ReAssured – 24-month contract with specific and aggregate stop-loss coverage. ReAssured guarantees your fixed costs for two years and can help you plan ahead and spread out potential risk.

Check with your sales executive for pricing associated with the options above.

| Plan | Medicare Part D creditable coverage | IN-NETWORK | | | | | | | | OUT-OF-NETWORK | |
|--|-------------------------------------|-----------------|------------------|---------------|-------------------------------|-----|-------|--------|-------|-------------------|-------------------|
| | | Deductible | OOP | Office visits | Inpatient/outpatient hospital | Lab | X-ray | MRI/CT | ER | Deductible | OOP |
| All-Copay | | | | | | | | | | | |
| \$30/\$60–\$5,500 | Y | None | \$5,500/\$11,000 | \$30/\$60 | \$2,000 | \$0 | \$0 | \$200 | \$500 | \$15,000/\$30,000 | \$30,000/\$60,000 |
| \$45/\$90–\$7,900 | Y | None | \$7,900/\$15,800 | \$45/\$90 | \$2,000 | \$0 | \$0 | \$200 | \$500 | \$15,000/\$30,000 | \$30,000/\$60,000 |
| All plans have a pharmacy benefit of \$15 formulary generic/\$50 formulary brand/\$100 non-formulary/\$500 specialty. • MRI/CT cost may vary based on location of service. • Inpatient copay applies per day for the first three days. • All plans have free visits to virtuwell®. | | | | | | | | | | | |
| Copay-Coinsurance | | | | | | | | | | | |
| \$25–100% | Y | None | \$2,750/\$5,500 | \$25 | 0% | 0% | 0% | 20% | \$100 | \$3,000/\$9,000 | \$18,000 |
| \$25–80% | Y | None | \$3,250/\$6,500 | \$25 | 20% | 0% | 0% | 20% | \$100 | \$3,000/\$9,000 | \$18,000 |
| Copay-Deductible | | | | | | | | | | | |
| \$500–\$25 | Y | \$500/\$1,000 | \$3,500/\$7,000 | \$25 | 20% | 0% | 0% | 20% | 20% | \$3,000/\$9,000 | \$18,000 |
| \$500–\$40 | Y | \$500/\$1,000 | \$3,750/\$7,500 | \$40 | 20% | 0% | 0% | 20% | 20% | \$3,000/\$9,000 | \$18,000 |
| \$1,000–\$25 | Y | \$1,000/\$2,000 | \$4,000/\$8,000 | \$25 | 20% | 0% | 0% | 20% | 20% | \$3,000/\$9,000 | \$18,000 |
| \$1,000–\$40 | Y | \$1,000/\$2,000 | \$4,250/\$8,500 | \$40 | 20% | 0% | 0% | 20% | 20% | \$3,000/\$9,000 | \$18,000 |
| \$1,500–\$45 | Y | \$1,500/\$3,000 | \$5,000/\$10,000 | \$45 | 20% | 0% | 0% | 20% | 20% | \$4,500/\$13,500 | \$27,000 |
| \$2,000–\$45 | Y | \$2,000/\$4,000 | \$5,500/\$11,000 | \$45 | 20% | 0% | 0% | 20% | 20% | \$6,000/\$18,000 | \$36,000 |
| \$2,500–\$45 | Y | \$2,500/\$5,000 | \$6,000/\$12,000 | \$45 | 20% | 0% | 0% | 20% | 20% | \$7,500/\$22,500 | \$45,000 |
| Primary-Specialty | | | | | | | | | | | |
| \$500–\$30/\$60 | Y | \$500/\$1,500 | \$4,000/\$8,000 | \$30/\$60 | 20% | 0% | 0% | 20% | 20% | \$4,500/\$9,000 | \$30,000/\$60,000 |
| \$1,000–\$45/\$90 | Y | \$1,000/\$3,000 | \$5,000/\$10,000 | \$45/\$90 | 20% | 0% | 0% | 20% | 20% | \$4,500/\$13,500 | \$30,000/\$60,000 |
| \$1,500–\$45/\$90 | Y | \$1,500/\$4,500 | \$6,000/\$12,000 | \$45/\$90 | 20% | 0% | 0% | 20% | 20% | \$4,500/\$13,500 | \$30,000/\$60,000 |

All plans have a pharmacy benefit of \$15 formulary generic/\$50 formulary brand/\$100 non-formulary. Specialty drugs are 20 percent up to a \$500 maximum per prescription. • All plans have free visits to virtuwell®.

| Plan | Medicare Part D creditable coverage | IN-NETWORK | | | | | OUT-OF-NETWORK | |
|---|-------------------------------------|-----------------|-----------------|---------------------|-------------------------|-----------------------------|-------------------|-------------------|
| | | Deductible | OOP | Medical coinsurance | Formulary prescriptions | Non-formulary prescriptions | Deductible | OOP |
| HSA Non-Embedded (Contract) Deductible | | | | | | | | |
| \$1,500–100% | Y | \$1,500/\$3,000 | \$1,500/\$3,000 | 0% | 0% | Not covered | \$4,500/\$9,000 | \$13,500/\$27,000 |
| \$2,000–100% | Y | \$2,000/\$4,000 | \$2,000/\$4,000 | 0% | 0% | | \$6,000/\$12,000 | \$18,000/\$36,000 |
| \$2,500–100% | N | \$2,500/\$5,000 | \$2,500/\$5,000 | 0% | 0% | | \$7,500/\$15,000 | \$22,500/\$45,000 |
| \$3,000–100% | N | \$3,000/\$6,000 | \$3,000/\$6,000 | 0% | 0% | | \$9,000/\$18,000 | \$27,000/\$54,000 |
| \$3,500–100% | N | \$3,500/\$7,000 | \$3,500/\$7,000 | 0% | 0% | | \$10,500/\$21,000 | \$31,500/\$63,000 |

| | | | | | | | | |
|--------------------------------|---|------------------|------------------|----|----|-------------|-------------------|-------------------|
| HSA Embedded Deductible | | | | | | | | |
| \$2,700–100% | N | \$2,700/\$5,400 | \$2,700/\$5,400 | 0% | 0% | Not covered | \$8,100/\$16,200 | \$24,400/\$48,600 |
| \$3,000–100% | N | \$3,000/\$6,000 | \$3,000/\$6,000 | 0% | 0% | | \$9,000/\$18,000 | \$27,000/\$54,000 |
| \$3,500–100% | N | \$3,500/\$7,000 | \$3,500/\$7,000 | 0% | 0% | | \$10,500/\$21,000 | \$31,500/\$63,000 |
| \$4,000–100% | N | \$4,000/\$8,000 | \$4,000/\$8,000 | 0% | 0% | | \$12,000/\$24,000 | \$32,000/\$64,000 |
| \$4,500–100% | N | \$4,500/\$9,000 | \$4,500/\$9,000 | 0% | 0% | | \$13,500/\$27,000 | \$33,500/\$67,000 |
| \$5,000–100% | N | \$5,000/\$10,000 | \$5,000/\$10,000 | 0% | 0% | | \$15,000/\$30,000 | \$35,000/\$70,000 |
| \$6,350–100% | N | \$6,350/\$12,700 | \$6,350/\$12,700 | 0% | 0% | | \$19,500/\$38,100 | \$38,100/\$76,200 |

HSA plans have 100 percent coverage for virtuwell® after deductible.

| | | | | | | | | |
|---|---|-----------------|-----------------|-----|-----|-----|------------------|-------------------|
| HSA Rx Plus Non-Embedded (Contract) Deductible | | | | | | | | |
| \$1,500–100% | Y | \$1,500/\$3,000 | \$2,000/\$4,000 | 0% | 0% | 20% | \$4,500/\$9,000 | \$13,500/\$27,000 |
| \$2,000–100% | Y | \$2,000/\$4,000 | \$2,500/\$5,000 | 0% | 0% | 20% | \$6,000/\$12,000 | \$18,000/\$36,000 |
| \$2,500–100% | Y | \$2,500/\$5,000 | \$3,000/\$6,000 | 0% | 0% | 20% | \$7,500/\$15,000 | \$22,500/\$45,000 |
| \$3,000–100% | Y | \$3,000/\$6,000 | \$3,500/\$7,000 | 0% | 0% | 20% | \$9,000/\$18,000 | \$27,000/\$54,000 |
| \$2,000–80% | Y | \$2,000/\$4,000 | \$3,250/\$6,500 | 20% | 20% | 40% | \$6,000/\$12,000 | \$18,000/\$36,000 |

| | | | | | | | | |
|--|---|-----------------|------------------|-----|-----|-----|-------------------|-------------------|
| HSA Rx Plus Embedded Deductible | | | | | | | | |
| \$2,700–100% | Y | \$2,700/\$5,400 | \$3,200/\$6,400 | 0% | 0% | 20% | \$8,100/\$16,200 | \$24,400/\$48,600 |
| \$3,000–100% | Y | \$3,000/\$6,000 | \$3,500/\$7,000 | 0% | 0% | 20% | \$9,000/\$18,000 | \$27,000/\$54,000 |
| \$3,500–100% | Y | \$3,500/\$7,000 | \$4,000/\$8,000 | 0% | 0% | 20% | \$10,500/\$21,000 | \$31,500/\$63,000 |
| \$2,700–80% | Y | \$2,700/\$5,400 | \$4,100/\$8,200 | 20% | 20% | 40% | \$8,100/\$16,200 | \$24,400/\$48,600 |
| \$3,500–80% | Y | \$3,500/\$7,000 | \$5,500/\$11,000 | 20% | 20% | 40% | \$10,500/\$21,000 | \$31,500/\$63,000 |

Select preventive drugs are covered at 100 percent generic/\$50 copay brand. Visit healthpartners.com/formulary to see the Preventive Drug List. Specialty drug benefit for HSA Rx Plus Contract Deductible \$2,000-80% plan, Embedded Deductible \$2,700-80% plan and Embedded Deductible \$3,500-80% plan has a maximum of \$500 per prescription after deductible. • HSA Rx Plus plans have 100 percent coverage for virtuwell® after deductible.

| Plan | Medicare Part D creditable coverage | IN-NETWORK | | | | | | | | OUT-OF-NETWORK | |
|------|-------------------------------------|------------|-----|---------------|-------------------------------|-----|-------|--------|----|----------------|-----|
| | | Deductible | OOP | Office visits | Inpatient/outpatient hospital | Lab | X-ray | MRI/CT | ER | Deductible | OOP |

Three for Free

| | | | | | | | | | | | |
|-------------|---|-----------------|------------------|-----|-----|-----|-----|-----|-----|------------------|----------|
| \$1,000–80% | Y | \$1,000/\$2,000 | \$4,250/\$8,500 | 20% | 20% | 20% | 20% | 20% | 20% | \$3,000/\$9,000 | \$18,000 |
| \$1,500–80% | Y | \$1,500/\$3,000 | \$4,500/\$9,000 | 20% | 20% | 20% | 20% | 20% | 20% | \$4,500/\$13,500 | \$27,000 |
| \$2,000–80% | Y | \$2,000/\$4,000 | \$4,750/\$9,500 | 20% | 20% | 20% | 20% | 20% | 20% | \$6,000/\$18,000 | \$36,000 |
| \$2,500–80% | Y | \$2,500/\$5,000 | \$5,000/\$10,000 | 20% | 20% | 20% | 20% | 20% | 20% | \$7,500/\$22,500 | \$45,000 |

All plans have a pharmacy benefit of \$15 formulary generic/\$50 formulary brand/\$100 non-formulary. Specialty drugs are 20 percent up to a \$500 maximum per prescription. • All plans have free visits to virtuwell®. • For in-network services, each family member may receive up to a combined total of three office visits, convenience care and urgent care visits each year where the physician’s services are covered at 100 percent. All charges for office procedures, laboratory, radiology, day treatment services, group visits, chiropractic care, physical, occupational and speech therapy services are subject to the deductible and coinsurance.

HRA Embedded Deductible

| | | | | | | | | | | | |
|--------------|---|------------------|------------------|-----|-----|-----|-----|-----|-----|-------------------|-------------------|
| \$2,500–100% | Y | \$2,500/\$5,000 | \$3,000/\$6,000 | 0% | 0% | 0% | 0% | 0% | 0% | \$7,800/\$15,600 | \$23,400/\$46,800 |
| \$5,000–100% | Y | \$5,000/\$10,000 | \$5,500/\$11,000 | 0% | 0% | 0% | 0% | 0% | 0% | \$15,000/\$30,000 | \$30,000/\$60,000 |
| \$2,500–80% | Y | \$2,500/\$5,000 | \$5,000/\$10,000 | 20% | 20% | 20% | 20% | 20% | 20% | \$7,800/\$15,600 | \$23,400/\$46,800 |
| \$4,000–80% | Y | \$4,000/\$8,000 | \$6,000/\$12,000 | 20% | 20% | 20% | 20% | 20% | 20% | \$15,000/\$30,000 | \$30,000/\$60,000 |

All plans have a pharmacy benefit of \$15 formulary generic/\$50 formulary brand/\$100 non-formulary. Specialty drugs are 20 percent up to a \$500 maximum per prescription. • Prescription benefit is pre-deductible; plan is not HSA-qualified. • All HRAs must have plan-year benefit administration. • HRA accounts must be administered by HealthPartners. • The employer must contribute no more than 50 percent of the deductible to the HRA account. • All plans have free visits to virtuwell®.

Benefit details

- The drug list is GenericsAdvantageRx formulary.
- Preventive care is covered 100 percent.
- Members get unlimited visits with no cost sharing for use of virtuwel® – a 24/7 online clinic for simple and fast care (for HSA plans, coverage begins after deductible).
- Out-of-network urgent care and emergency care services are covered at in-network levels. All other out-of-network services are covered 50 percent after deductible.
- Refer to the coverage requirements at [healthpartners.com](https://www.healthpartners.com) for more details.

Administration

- EZ medical plans are required for all large groups with less than 100 eligible employees.
- Level funded groups with 20-50 enrolled employees may offer up to three plans. All three plans may be offered on two networks.
- Groups with 51+ enrolled employees may offer up to four plans. All four plans may be offered on two networks.
- SI EZ groups can only offer additional plan options that are also SI EZ.
- An embedded high deductible health plan cannot be offered next to a non-embedded high deductible health plan.
- Plan administration must match for all plans chosen by a group. This means a group will choose either plan-year or calendar-year administration for all plans being offered.

QUESTIONS? CALL US!

We have the information you need and are ready to help you. Reach us at the numbers below, Monday through Friday from 8 a.m. to 5 p.m.

Robin with HealthPartners Sales Team:

For help coordinating contract and renewal processes, obtaining enrollment materials and managing benefit changes. **920-328-1661** or **833-437-1217**

Membership Accounting:

For setup and resolution of billing, enrollment and eligibility issues. **888-880-9114**

Broker VIP Line:

Direct connection to quick, accurate information on member-specific questions. **800-828-1159**